LIBRARY

Crawley Urban District Council

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR 1959

FOURTH

A N N U A L R E P O R T

OF THE PUBLIC HEALTH DEPARTMENT

of the

CRAWLEY URBAN DISTRICT

of

WEST SUSSEX

1959

K.N. Mawson, M.B., Ch.B., D.P.H., F.R.S.H.
Medical Officer of Health
T. Steel, M.A.P.H.I., M.R.S.H.
Chief Public Health Inspector

Health Department,
Goffs Park House,
CRAWLEY.

(Telephone: Crawley 25511)

Digitized by the Internet Archive
in 2017 with funding from
Wellcome Library

https://archive.org/details/b29126691

CRAWLEY URBAN DISTRICT COUNCIL

June, 1960.

Health Department,
Goffs Park House,
Crawley.

To the: Chairman and Members of the
Crawley Urban District Council

Ladies and Gentlemen,

I have the honour to present to you the Annual Report for 1959, in which an account is given of the work of the Public Health Department during the year. This is the fourth Report since the Urban District was formed in April, 1956, and it has been prepared in accordance with Ministry of Health Circular No. 1/60.

Vital Statistics

Figures will be found on page 11. The number of births rose to 1,263, but this represents a Birth Rate of 25.34 as compared with 26.25 in 1958. Of the total, 22 were illegitimate, the corresponding figure for 1958 being 27. After application of the comparability factor as supplied by the Registrar-General, the Corrected Birth Rate is 17.74.

No maternal deaths occurred, but 21 infants died in the first year (11 males and 10 females, - all legitimate). Of these deaths, 15 took place within the first month of life and 12 within the first week, mainly from prematurity and congenital defects, the latter accounting for eight. The Infant Mortality Rate is therefore 16.34 (13.77 in 1958) and the Neonatal I.M.R. 10.67.

The total deaths registered during the year amounted to 255, a drop of 6 from the previous year in spite of the fact that the population had increased by nearly 4,000. The Crude Death Rate fell from 5.5 to 5.03 and the Corrected Death Rate from 11.6 to 10.81. Both Birth Rate and Death Rate are well below the national average.

Detailed causes of death are shown on page 12. It will be seen that deaths from Cancer fell from 57 to 49 and heart disease from 76 to 65, but of course too much attention should not be paid to these minor fluctuations. Deaths from motor vehicle accidents rose from 1 to 4, but "other accidents" only accounted for 5 deaths as compared with 9 during 1958.

No deaths during 1959 were attributable to Pulmonary Tuberculosis, although one female died of non-pulmonary disease.

Of recent years there has been a spectacular decline in the mortality from Tuberculosis, largely due to the introduction of effective anti-tuberculous chemotherapy. Between 1948 and 1958 the figures in England and Wales dropped by 76% in males and 87% in females, and in children by 95%. It should however not be forgotten that during the century prior to 1947 tuberculosis mortality had shown a substantial fall. - attributable without doubt to the long term gradual improvement in the environmental conditions of people in Great Britain.

There can be no question that Mass Radiography has made a valuable contribution to ascertainment, although those in the older age groups are notoriously reluctant to submit to examination. Among them are those who, even when found to be suffering from active and infectious disease of the lung, are adamant in their refusal to accept treatment and this group poses a most difficult problem.

For many years powers have existed under the Public Health Acts to compel the compulsory segregation of highly infectious cases, but few authorities have in fact taken action. The time has certainly come when this attitude must be reconsidered. With the advent of streptomycin and chemotherapeutic drugs, the whole outlook in tuberculosis has changed and it has become easy to render the average case non-infectious. With the gradual decline in the incidence of fresh cases of the disease, beds are now available for the segregation and treatment of chronic infectious tuberculosis. Undoubtedly there should now be an extensive search for and compulsory isolation of all open cases until they have been rendered non-infectious.

Were action to be taken on these lines throughout the country, tuberculosis would soon become a rare disease in Britain.

Infectious Diseases

On page 14 will be found a table showing the incidence of those diseases which are notifiable. Again very few cases of Whooping Cough occurred - only four being notified - in spite of the many young children in the town. Measles however was very prevalent. Many cases had been reported late in 1958 and the outbreak continued into the following spring (1,118 notifications). Sixteen cases of Scarlet Fever were notified and 14 of Dysentery, - all of the latter being of a relatively mild type due to S. Sonne.

Two cases of meningococcal infection ("Cerebral Spinal Meningitis") occurred, the first being a baby of 7 months who was admitted to hospital in May, and the second a boy of 4 years who became ill in December.

In neither case could the source of infection be traced. Fortunately modern methods of treatment have to a large extent robbed this disease of its terrors.

Although the summer of 1959 was dry and warm, Crawley had an excellent record where Poliomyelitis was concerned. One man was thought to be suffering from paralytic poliomyelitis and notified accordingly, but hospital investigation did not confirm the diagnosis. Two cases of non-paralytic poliomyelitis were notified and admitted to Foredown Isolation Hospital in June, - a boy of 4 years from Langley Green and a woman of 28 years from Ifield. In both cases the initial symptoms were highly suggestive but rapid recovery followed. Virus investigations both from the patients and from all family contacts were completely negative. There must be considerable doubt whether either patient was in fact infected by a virus of the poliomyelitis group.

Two single cases of Food Poisoning were notified. In July a girl of 15 years living in Northgate was admitted to hospital at Redhill with suspected appendicitis. However bacteriological examination showed her to be suffering from a Salmonella typhi-murium infection and she was transferred to Bletchingley I.D.H. Careful enquiries at the home failed to reveal the source. In November a man living in Pound Hill, but working as a representative for a large firm in London, attended a social function in Marylebone. Information was received from the M.O.H. of that borough that a large outbreak of Salmonellosis had occurred and we were asked to trace any persons who had attended. The man in question had suffered from suggestive symptoms for which at that time he had not sought advice, and investigation showed him to be infected by Salmonella typhi-murium.

Although every effort is made to trace the source in all cases of Salmonella infection, it is very difficult to do so in single or "sporadic" cases. The investigation of an "outbreak" is usually much easier. The importance of thorough bacteriological investigation is exemplified by a family where two children only had symptoms. However all nine members were found to be affected, while the mother continued to excrete organisms for four months. In this case, as in two other single cases of typhi-murium infection, the source could not be identified.

Another family consisting of parents and four children was investigated following the admission of a two-year-old child to hospital, where she was found to be suffering from a Salmonella typhi-murium infection of a very unusual type. The three other children were symptomless excretors. It was later found that other cases had occurred in Sussex, where infection by the same organism

had been proved, and prolonged investigation suggested a link with an outbreak among calves in East Sussex. It appeared that infection had been spread through meat sold as pets' food.

The most important occurrence during the year from the epidemiological point of view was the outbreak of Paratyphoid in March. Full details are therefore set out below:-

The first information received was a telephone message on Friday, March 20th, which reported that two children from Crawley, who had been admitted two days before to Queen Mary's Hospital, Carshalton, for investigation, had been found to be suffering from Paratyphoid B. One was a girl of 11 years from Langley Green, and the second a 16-year-old girl living in the Three Bridges area, but working in London. A circular letter was despatched immediately to all medical practitioners in Crawley, giving clinical details of each patient and offering to assist with the collection and despatch of specimens from any suspicious cases. Careful enquiries were made in an endeavour to find a common factor, but without success. By the evening of Wednesday, the 25th, a further six children from the new Town had been admitted to Queen Mary's Hospital and, as the onset in each case appeared to be between March 10th to the 23rd, there was every likelihood that infection had been contracted from a common source. The most detailed enquiries from the affected households still failed to reveal any particular article of food or source of supply which might be the cause of infection. However on the morning of the following day, Thursday, April 26th, a ring from the Public Health Department at Chatham told us that a case of the disease had been notified there, the patient being an assistant in a bakery and confectionery shop, where certain supplies were obtained from Crawley. A visit was immediately paid by your M.O.H. and C.P.H.I. to the bakery named, when it was confirmed that confectionery was sent daily from Crawley to the headquarters of the firm in Chatham. Many different articles were prepared here and despatched, - including a total of over ninety "lines". Chatham on the other hand sent to Crawley ten varieties of bread, while both received jam sponges from Wales and slab cake from Hampshire. Knowing of previous similar outbreaks in recent years, we directed our enquiries to the source of egg products and found that frozen whole egg of Chinese origin had been in use from November until about a fortnight prior to our visit. During the same period, egg albumen from the same country of origin had been, and still was, in use. In view of the very considerable output of the bakery and the very large area served (both in Sussex and the Medway towns), information was passed at once to the Ministry of Health and a meeting arranged for the morning of Good Friday. By the evening of Thursday, March 26th, a total of nine children were under observation at Carshalton.

The next morning your officers, together with a Senior Medical Officer from the Ministry, met the Local Manager and the Managing Director from Chatham at the bakery. I cannot speak too highly of the co-operation we received from the firm. As we had no definite evidence to incriminate the bakery as the source of infection, we would have been powerless had such co-operation not been forthcoming. However when we had explained fully the reasons for our suspicions, the Managing Director himself offered to close down the confectionery-line during such time as we were carrying out our bacteriological investigations, - a step which must have involved heavy financial loss. Over the Easter weekend it was possible to obtain specimens from the male staff and these were sent immediately to the Brighton Public Health Laboratory, followed as soon as possible by the remainder. Although the most likely source of infection appeared to be Chinese egg, there was a possibility that a carrier existed among the staff, - either a chronic carrier who could have caused the outbreak, or temporary carriers infected from handling or eating articles in the bakery. In the detection of the carrier state, a single negative stool is insufficient to clear any patient and so on Tuesday, March 31st, specimens of blood for the Widal reaction were taken from forty employees. At the same time "environmental" specimens were collected by the C.P.H.I. and a Medical Officer of the Food Hygiene Division of the Ministry of Health from the various machines which had been, as far as possible, taken apart for examination and cleansing.

In addition to these investigations, over the Easter weekend it was necessary to re-visit families previously seen, together with the homes of three children who went into hospital on Good Friday. These visits revealed that in every case it was now possible to trace a connection between the patient and the bakery, for in several instances articles of confectionery had only been purchased from the suspected source on one occasion and had thus not been reported earlier. Only after the closest cross-examination did this information come to light. The amount of work involved in the investigations is to some extent shown by the following tables:-

Visits and Inspections

Total number of visits and inspections - 219

Visits to food premises	31
Visits re enquiries and faeces specimens	188

Specimens and Samples

Total number of specimens and samples taken - 254

Total number of faeces specimens	159
Total number of blood specimens	40
Total number of food specimens	43
Total number of environmental specimens (bakehouse)	9
Sewage swabs	3
Water samples	1

During the late summer and autumn of 1955 there was a sudden rise in the notification rate of paratyphoid. This disease first became separately notifiable in 1941 in England and Wales, since when a number of sudden increases have occurred, notably in 1948 when there were several simultaneous outbreaks in different parts of the country. Prior to the setting up of the Public Health Laboratory Service, with its chain of Reference Laboratories, it might not have been possible to establish a connection between these episodes, but by means of "phage typing" it was shown that all these outbreaks were due to a common infecting organism. Most of the outbreaks of this disease recorded since the war have been associated with artificial cream used in the preparation of cakes, sponges, buns, etc., for the organism can multiply freely once contact is made with flour and other ingredients. It is probable that this point is of considerable importance, for it is believed that with paratyphoid, in contrast to typhoid, a fairly heavy dose of organisms is necessary to cause infection. During the 1955 outbreaks, to which reference is made below, it was found that most of the patients had purchased cakes from retail shops or from roundsmen, and not direct from the bakeries, and thus the longer lapse of time between preparation and consumption may have permitted greater bacterial growth.

The two main outbreaks in 1955 occurred during August at Worthing (14 cases) and at Weymouth (also 14 cases). In both instances bakery products were suspected as being directly responsible for the infection, and a batch of Chinese frozen whole egg, used in the two bakeries, appeared on epidemiological grounds to be the most likely source of contamination. Confirmation came from the isolation of the same type of paratyphoid organism from unopened tins of the egg, from some of the bakery staff, and from the patients.

Here in Crawley we were less fortunate. As mentioned above, the bakery had ceased to use frozen whole egg about two weeks before our first visit, although some 6 tins, each of 44 lbs., remained in cold store. These were willingly surrendered and each tin was carefully sampled by the Inspectors, specimens being taken to the Public

Health Laboratory at Brighton for examination. From one of these, Salmonella thompson was isolated. This is a troublesome organism which is becoming increasingly common in this country. From none of the tins was Salmonella paratyphi isolated, nor was the organism recovered from any of the staff or from the environmental samples taken at the bakery. S. paratyphi was present in specimens from the father and mother of the first case and from those of the mother of the second child; also from the father of one of the subsequent patients. All later home contacts proved negative. These four parents were all "symptomless excretors" for a short time only.

While it is disappointing that the final proof was not forthcoming, I have no doubt on epidemiological grounds that the cause of the outbreak arose in the bakery and that infection was introduced in the frozen whole egg.

It will be readily understood that the investigation of this outbreak, together with the administrative action necessary, involved the Public Health Department in a great deal of work, and I am deeply grateful to the staff, - particularly to Mr. Steel and Mr. Tyler, who worked long hours over the Easter holiday period and after. The co-operation of the general practitioners, who kept me fully informed regarding suspected cases, was greatly appreciated. I would also like to make special mention of the invaluable help we received from Dr. Jameson and his staff at the Brighton Public Health Laboratory, who willingly undertook much work over what would normally have been holiday-time, and to Dr. Stone of the Epsom Public Health Laboratory who was responsible for the many Widal examinations. To Dr. Stewart, the Pathologist at Queen Mary's Hospital, and to the medical staff of the institution, we are greatly indebted, not only for early information on the original cases, but for their whole-hearted co-operation in tracing the cause of the outbreak. Might I also express my sincere appreciation of the support given me by the members of the Public Health Committee at its meeting in April.

The fact that this outbreak in Crawley was only one of a series in the country does suggest that the present precautions may be insufficient to prevent trouble in the future. Admittedly routine sampling of imported egg products takes place at ports of entry, but it is impossible to sample all tins. A negative bacteriological test on limited samples cannot be conclusive evidence that the whole batch is fit, unless this use is limited to certain processes involving sterilisation. In November 1955 the Trade Associations co-operated by bringing to the notice of all their members the precautions necessary, giving full information about the various processes for which egg albumen etc. might or might not be used. In all probability these measures have done much to prevent outbreaks, but so long as the

importation of frozen egg is permitted the risk must remain, unless all such material undergoes a process of sterilisation before issue.

When reporting to the Public Health Committee in May, 1959, I mentioned that the A.P.V. Company had designed and is producing at Crawley a liquid-egg pasteurising plant. I went on to say that at that time only one such plant was in operation in England, - at Oldham -, and that I was assured by the M.O.H. of that borough that regular bacteriological sampling was showing very satisfactory results. It is a little astonishing that, in spite of a number of enquiries, none other of the firms responsible for the importation from abroad of liquid egg has yet set up one of these plants. One sincerely hopes the Medical Research Council will make a definite recommendation in the near future that sterilisation of all such products should be made compulsory.

Care of the Aged

This problem steadily becomes more acute in its economic, social and medical aspects.

Prior to 1948, when County Councils were Health and Welfare Authorities who controlled both hospitals and welfare homes, it was possible for them to arrange transfer as necessary from one to the other. As a result of the separation of the Health and Welfare services, following the National Health Service Act which places each under a different Authority, difficulties have increased. The existing shortage of beds compels the hospitals to review all applications with scrupulous care, and to refuse any who are not urgently in need of medical treatment. Only too often even those who are cannot be admitted. The Welfare Authorities on the other hand are also short of accommodation and the staffing of their institutions prevents them from admitting bedridden cases.

It was not necessary during 1959 to take action under Section 47 of the National Assistance Act, 1948. This is the section which deals with the removal from home of elderly and infirm persons, living in insanitary conditions.

My thanks are again due to Mr. Steel, the Chief Public Health Inspector, and to the staff of the Department for their help and co-operation. My secretary, Miss Heydon, has been responsible for the typing of this report and the duplication has been carried out by the staff of the Health Department. By this method the high cost of printing is avoided and it is possible to issue the report at an earlier date.

I would like to take this opportunity of expressing my appreciation of the support I have received from the Chairman and Members of the Public Health Committee.

I am, Ladies and Gentlemen,

Your obedient Servant,

Medical Officer of Health.

Members of the Public Health Committee

Mr. R.G. Davis-Poynter (Chairman)
Mrs. N. Simkins (Vice-Chairman)
Mr. S.J. Church
Mr. F.C. Feltham
Major B.H. Jones
Mr. A.E. Pegler, J.P.
Mr. K.J. Richards
Mrs. N.B.M. Sharp
Mr. E.V. Vygus

Staff of the Public Health Department

Kenneth N. Mawson, M.B., Ch.B., D.P.H., F.R.S.H.
Medical Officer of Health; also Assistant County Medical Officer and School M.O. to the West Sussex County Council, and M.O.H. to N.E. Combined Sanitary Districts of W.Sussex.

T. Steel, M.A.P.H.I., M.R.S.H., Chief Public Health Inspector
Certificate of the Royal Sanitary Institute and Sanitary Inspectors Joint Board.
Certificate of the Royal Sanitary Institute for Inspectors of Meat and Other Foods.

K.J. Tyler, M.A.P.H.I., M.R.S.H., Senior Additional Public Health Inspector
Certificate of the Royal Sanitary Institute and Sanitary Inspectors Joint Board.
Certificate of the Royal Sanitary Institute for Inspectors of Meat and Other Foods.

L.P. Poole, M.A.P.H.I., M.R.S.H., Additional Public Health Inspector
Certificate of the Royal Sanitary Institute and Sanitary Inspectors Joint Board.
Certificate of the Royal Sanitary Institute for Inspectors of Meat and Other Foods.

Clerks - Miss W. Brackpool and Miss G. Weston

Secretary to M.O.H. - Miss M. Heydon

CRAWLEY URBAN DISTRICT COUNCIL

Statistics & Social Conditions of the Area 1959

Area (Acres)	5,622
Estimated resident population, mid-1959	50,710
Number of Inhabited Houses (31st December, 1959) according to the Rate Books	14,800
Rateable Value (31st December, 1959)	£950,518
Sum represented by a Penny Rate (estimated)	£3,930

EXTRACTS FROM VITAL STATISTICS OF THE YEAR

	Total	M.	F.	
Live Births (Legitimate	1263	644	619)	Birth Rate = 25.34
(Illegitimate	22	11	11)	per 1,000 estimated resident population in mid-1959.
Still Births (all legitimate)	27	16	11)	Rate per 1,000 total births = 21.01
Deaths	255			Crude Death Rate = 5.03
England & Wales Birth Rate	16.5			Death Rate = 11.6

Birth Rate corrected by Comparability Factor = 17.74

Death Rate corrected by Comparability Factor = 10.81

West Sussex Urban Districts Birth Rate = 14.90 Death Rate = 14.55

Deaths from Puerperal Causes: (Deaths from Pregnancy, Childbirth and Abortion) = 0

Deaths	Rate per 1,000 Total Births
0	0.00

During the year, 11 male and 10 female infants died before a year. All were legitimate infants.

Death Rate of Infants under 1 year of age:-

All Infants per 1,000 Live Births	16.34
Legitimate Infants per 1,000 Legitimate Live Births	16.63
Illegitimate Infants per 1,000 Illegitimate Live Births ...	0.00
(Infant Mortality Rate for England and Wales	22.0)

Of the above 21 infant deaths, fifteen (9 male and 6 female) occurred in the first month, and of these, twelve within the first week (8 male and 4 female).

Neonatal I.M.R. 10.67

Extracts from Vital Statistics (Continued)

Deaths from Cancer (all ages	49	(57)
Deaths from Measles (all ages	0	(0)
Deaths from Whooping Cough (all ages)	0	(0)

(The figures in brackets refer to 1958)

CAUSES OF DEATH IN THE CRAWLEY URBAN DISTRICT

		Males	Females
1.	Tuberculosis, respiratory	0 (0)	0 (1)
2.	Tuberculosis, other	0 (0)	1 (0)
3.	Syphilitic disease	0 (1)	1 (1)
4.	Diphtheria	0 (0)	0 (0)
5.	Whooping Cough	0 (0)	0 (0)
6.	Meningococcal infections	0 (0)	0 (0)
7.	Acute poliomyelitis	0 (0)	0 (1)
8.	Measles	0 (0)	0 (0)
9.	Other infective and parasitic diseases	0 (0)	1 (1)
10.	Malignant neoplasm, stomach	1 (2)	4 (2)
11.	Malignant neoplasm, lung, bronchus	7 (24)	1 (0)
12.	Malignant neoplasm, breast	0 (0)	6 (7)
13.	Malignant neoplasm, uterus	0 (0)	4 (3)
14.	Other malignant & lymphatic neoplasms	13 (8)	13 (11)
15.	Leukaemia, aleukaemia	0 (1)	2 (2)
16.	Diabetes	0 (2)	1 (1)
17.	Vascular lesions of nervous system	13 (11)	13 (10)
18.	Coronary disease, angina	21 (25)	11 (14)
19.	Hypertension with heart disease	1 (3)	4 (4)
20.	Other heart disease	18 (11)	10 (19)
21.	Other circulatory disease	4 (7)	11 (3)
22.	Influenza	1 (1)	1 (0)
23.	Pneumonia	13 (16)	13 (16)
24.	Bronchitis	4 (5)	5 (2)
25.	Other diseases of respiratory system	1 (2)	0 (1)
26.	Ulcer of stomach and duodenum	1 (0)	0 (1)
27.	Gastritis, enteritis and diarrhoea	0 (0)	3 (0)
28.	Nephritis and nephrosis	0 (1)	3 (1)
29.	Hyperplasia of prostate	0 (0)	0 (0)
30.	Pregnancy, childbirth and abortion	0 (0)	0 (0)
31.	Congenital malformations	6 (1)	2 (5)
32.	Other defined and ill-defined diseases	11 (7)	14 (13)
33.	Motor vehicle accidents	3 (1)	1 (0)
34.	All other accidents	2 (5)	3 (4)
35.	Suicide	5 (2)	2 (2)
36.	Homicide and operations of war	0 (0)	0 (0)
		125(136)	130(125)

SOCIAL CONDITIONS

Crawley is one of eight New Towns now being built in a ring approximately 25 to 30 miles from the centre of London. Largely as a result of unplanned development during the last century, nearly 25% of England's population live in the great conurbation of London. The necessity of making lengthy journeys to work, transport problems, greater risks in time of war, and the absence of a genuine community spirit all stem from this cause.

Whereas the designated area of the town housed only 9,500 people in 1947, the present population is over 51,000. Thus over 40,000 people, mainly from the metropolis, have been moved to new surroundings where they enjoy a high standard of living and have established a settled community. Covering 6,000 acres, the town is approximately 3½ miles across and is surrounded by a green belt with ready access to the countryside.

While the Crawley Development Corporation is responsible for the planning and building of the town, including the majority of houses, most shops and some factories, the administration of the area is in the hands of the local authorities, - the West Sussex County Council and the Crawley Urban District Council.

The town has been planned to have nine Residential Areas (with populations varying from 4,600 to 8,250, a Town Centre and an Industrial Area, the last being situated to the north of the town on the London side, adjoining the main road and railway. Each Residential Area, eight of which are completed, is largely self-contained, having a Primary School, shops which provide for daily needs, a Church and a Public House. This arrangement cuts to a minimum the distance which children are obliged to walk to school in their early years. As Education Authority, the West Sussex County Council has provided 8,480 places in primary schools, 5,290 in secondary modern and grammar schools and over 1,400 in the College of Further Education. This College serves a wide area and further development is proposed in the near future.

One permanent community centre adjoins the West Green Primary School and eight Community Huts have been built in the Neighbourhoods, those in Tilgate and Gossops Green having been erected in 1959. There must be few towns of similar size which can boast of 360 societies covering every phase of activity.

The number of dwellings erected by the Crawley Development Corporation totals 10,254 at the time of writing, including both houses and flats. There is a wide variation in the size and type of accommodation provided, with over 250 types of dwelling, and the average density is 12.3 to the acre. At the end of 1959 the Crawley Urban District Council had 891 properties in occupation.

The vast majority of the residents work in Crawley, either in factories or in the town services. Seventy-two factories are in production and five in course of erection. Unemployment is at a very low level, the number of unemployed men and women on the register in March 1960 being 51 and 49 respectively, - from a total employment register at 21,800 persons. In spite of the rise in the number of school-leavers during 1959, all were placed in employment within a few months. However the sharp rise which will occur during the next few years in the number requiring jobs must give rise to concern.

The Development Corporation has followed a shopping policy which has provided a limited number of shops in the Neighbourhood centres, 117 in all, the larger number being in the more distant areas. Thus the town centre has become a shopping area of regional importance, having 150 new shops trading. This figure includes departmental stores, banks, gas and electricity showrooms etc.

NOTIFIABLE DISEASES

The following cases were notified during 1959. The figures in brackets indicate the number of cases notified the previous year.

Scarlet Fever	16	(6)
Whooping Cough	4	(2)
Poliomyelitis (Paralytic)	1(DNC)	(4)
Poliomyelitis (Non-Paralytic).	2	(3)
Measles	1118	(329)
Food Poisoning	2	(2)
Puerperal Pyrexia	1	(1)
Dysentery	14	(1)
Paratyphoid	12	(0)
Meningococcal infection	2	(0)

TUBERCULOSIS

Number of cases added to the Register during the year - 43
(87 in 1958)

(Of this number 17 were new cases, the remainder being "transfers" when the patient moved to Crawley).

Pulmonary Males	17	Non-Pulmonary Males	-
Pulmonary Females	20	Non-Pulmonary Females	6

One death occurred during the year, - that of a female who died of non-pulmonary disease.
The number of cases of Tuberculosis on the Register at the 31st December, 1959 was 417.

DIPHTHERIA IMMUNISATION

During the year 1,499 children under 5 years of age, and 88 between the ages of 5 and 15 years, received the full course of immunisation. In addition 1,017 children, who had previously been protected, were given a "reinforcing" dose.

The majority of these children were immunised by their family doctors through the National Health Services. As most practitioners in the area use "double" or "triple" antigen, protection was also given against Whooping Cough and, in many cases, Tetanus. It is hoped that the same facilities will become available in the County Clinics.

ACCOMMODATION FOR INFECTIOUS DISEASE

The following known cases of notifiable disease were admitted to hospital during the period ending 31st December, 1959:-

Cuckfield Hospital

Dysentery	1

Foredown I.D.H.

Poliomyelitis (Non-Paralytic)	2

Queen Mary's Hospital, Carshalton

Meningococcal Infection	2
Paratyphoid	12

East Surrey Hospital, Redhill

Food Poisoning	1

Grove Hospital, Tooting

Poliomyelitis (Paralytic)	1 (DNC)

Swandean Isolation Hospital

Scarlet Fever	1

GENERAL PROVISION OF HEALTH SERVICES IN THE AREA

1. Laboratory Facilities

Whereas previously all routine bacteriological work from the Horsham Rural District had been referred to the Epsom Laboratory of the Public Health Laboratory Service, arrangements were made early in 1956 for specimens from Crawley to be sent to the Brighton Laboratory. It is desirable that all specimens should reach a Laboratory with the minimum of delay, and it was found that transport to Brighton would prove quicker and generally more convenient. Routine samples of water, milk and ice-cream are submitted, together with many other types of specimens for bacteriological examination when necessary. All general practitioners in the area were informed of the scheme and invited to make use of our transport arrangements when necessary.

We are indebted to Dr. J.E. Jameson, Director of the Laboratory, for his assistance and advice on many occasions.

2. Ambulance Facilities

The operation of this service, for which the West Sussex County Council as Local Health Authority is responsible, is carried out by the St. John Ambulance Brigade, the day-to-day administration being under the control of the local Divisional Superintendent.

Four ambulance vehicles are provided, with a staff of four paid drivers and one driver/attendant. During 1959 the Crawley ambulance fleet covered a total mileage of 74,773, - as compared with 69,516 during 1958. Much help is given on a voluntary basis by the members of the Crawley Ambulance Division of St. John, - and by the ladies of the Nursing Division who frequently act as ambulance attendants on a voluntary basis.

The Hospital Car Service, in the north-east corner of the County, is under the control of the transport officer at Horsham, serving the whole of this area. During 1959, these voluntary drivers covered 335,846 miles when transporting patients to hospitals and clinics.

3. Hospital Accommodation for Infectious Disease

The majority of cases of infectious disease in need of hospital treatment are normally admitted to Foredown I.D.H. at Hove, although the number sent in during 1959 was small. I must express my appreciation of the helpful co-operation of the Medical Superintendent.

We are advised that any cases of Smallpox occurring in the District should be sent to the River Hospital (Long Reach), Dartford, Kent.

General Provision of Health Services in the Area (Continued)

4. Clinics and Treatment Centres.

A. By Local Health Authority.

The following is an account of the Services provided in the area by the West Sussex County Council as Local Health Authority.

(a) Nursing: The West Sussex County Council employs District Nurses, Midwives, Health Visitors and School Nurses. In Crawley the Health Visitors act as School Nurses, but District Nurses and Midwives operate separately.

(b) Maternity and Child Welfare: Infant Welfare Clinics are held as follows:-

Health Clinic, Exchange Road, Crawley. Sessions are held each Tuesday from 2 p.m., a doctor being in attendance on the second and fourth Tuesday in the month.

Langley Green Clinic. Sessions are held twice weekly (Monday and Wednesday) from 2.30 p.m., a doctor being in attendance on the second and fourth Monday and the first and third Wednesday in the month.

Jubilee Hall, Three Bridges. Sessions are held twice weekly (Monday and Thursday) from 2 p.m. A doctor is in attendance on the first and third Mondays and also on the second and fourth Thursdays.

Bishop Bell Clinic, Tilgate. Sessions are held on Mondays and Fridays from 2 - 4 p.m.

Ifield Community Hut. Sessions are held weekly on Fridays from 2 - 4 p.m.

Southgate Community Hut. Two sessions are held each week on Tuesdays and Thursdays from 2 - 4 p.m.

Gossops Green Clinic. (At Gossops Green School). Sessions are held weekly on Wednesdays from 2 - 4 p.m.

Contraceptive Clinic

Langley Green Clinic. A Family Planning Clinic is held at 1.45 p.m. on the first and second Tuesday in each month and at 7.15 p.m. on the third and fourth Mondays.

General Provision of Health Services in the Area (Continued)

Relaxation Classes

Health Clinic, Exchange Road, Crawley. Classes are held fortnightly on Thursdays at 2.15 p.m.

Jubilee Hall, Three Bridges. Classes are held fortnightly on Thursdays at 10.30 a.m.

Bishop Bell Clinic, Tilgate. Classes are held on Thursdays at 2 p.m.

Gossops Green Clinic. Classes are held weekly on Mondays at 2.15 p.m.

Langley Green Clinic. Classes are held weekly on Thursdays at 7.30 p.m. (as required).

(c) School Health Service. Regular inspections of children are carried out at all schools by the District M.O.H. and other School Medical Officers in the service of the County Council.

One full-time Dental Surgeon operates in Crawley, with assistance from other members of the County staff. Regular sessions are held at the Langley Green and Tilgate Clinics and in the medical rooms of the new schools.

Eye, Orthopaedic and Physiotherapy Clinics are held in the town, but children who are referred from the Orthopaedic Department, as requiring examination by the Consultant Orthopaedic Surgeon, are seen by him at the Horsham Health Centre.

Sessions for immunisation against Diphtheria and Poliomyelitis are held at the Robinson Road, Langley Green and Three Bridges Clinics, and also at the Bishop Bell Clinic in Tilgate. However the majority of children are treated in their schools, in order to cause the minimum of interference with the curricula.

(d) Home Help Service. This is controlled by the Women's Voluntary Services on behalf of the County Council. The value of this work cannot be over-estimated.

General Provision of Health Services in the Area (Continued)

B. Other Facilities.

(i) Hospital and Specialist Services. A comprehensive hospital and specialist service is provided by the Regional Hospital Board. Hospital accommodation of a private nature is available in certain circumstances, subject to appropriate charges.

(ii) General Medical and Dental Services. Everyone is entitled, as part of the arrangements of the National Health Service, to general medical and dental care. Local arrangements for these services are organised through the National Health Executive Council for West Sussex, 175, Broyle Road, Chichester.

(iii) Horsham Chest Clinic. This is held in the Health Centre adjoining Horsham Hospital, and is available to all residents in the area.

(iv) Venereal Diseases. Patients may attend the Clinic at the Redhill County Hospital or at the Royal Sussex County Hospital, Brighton. Treatment is confidential and times are as follows:-

Redhill County Hospital

Men - Mondays 5 p.m. to 7 p.m.
Women - Wednesdays 5 p.m. to 7 p.m.

Royal Sussex County Hospital

Men - Mondays 4.30 p.m. to 7.30 p.m.
Wednesdays 9.30 a.m. to 1 p.m.
Thursdays 1.30 p.m. to 4.30 p.m.

Women - Tuesdays 1.30 to 4.30 p.m.
Thursdays 10 a.m. to 1 p.m.
Saturdays 9.30 a.m. to 11.30 a.m.

SANITARY CIRCUMSTANCES OF THE AREA

by the Chief Public Health Inspector, Mr. T. Steel

There are no items in this report to which is is necessary to draw the Council's particular attention but, where appropriate, remarks are made in relation to the duties of the Department under their various headings.

It is, unfortunately, not yet possible to report any revision of unsatisfactory legislation to which I have previously drawn attention - e.g. the Housing Act "fitness" and overcrowding standards, and the control over the use of meat unfit for human consumption.

There was no change in staff and an additional inspector was not appointed, the vacant post having been twice advertised on the Special Salary Scales with unsatisfactory response. Although perhaps only a little ground was actually lost because of this, it was not possible to carry out the desired survey of older houses or to extend the work of the Department, as hoped, in such fields as food hygiene and health education.

I would again like to express my gratitude to all members of the staff of the Department for their continued efforts in maintaining the standards previously achieved.

TOTAL NUMBER OF INSPECTIONS FOR ALL PURPOSES 5,117

WATER SUPPLY

Sampling

Bacteriological:

No. of samples taken	Satisfactory	B. Coli present over 3 per 100 ml.
33	33	-

Chemical:

No. of samples taken	Satisfactory
2	2

No. of dwellinghouses supplied with main water direct to the houses	Estimated population
14,790	51,000

New houses connected to main supply 800

Number of houses with private supply 10
Number of sources involved 8
Bacteriological samples taken from private supplies .. 1
Number of samples found unsatisfactory 1

The results of the bacteriological examination of all the samples taken from main supplies were satisfactory.

During the year a considerable number of complaints was again received regarding "dirty" water due to disturbance of deposits of manganese and iron compounds in the mains carrying the Weir Wood supply. Most of the complaints were received during the summer and arose following unusual disturbance in the mains by a much greater use than normally of garden hoses during the hot dry weather. The Water Board again carried out flushing as far as practicable. Unless, however, the build-up of such deposits can be prevented, it is obvious that a flushing programme has to be designed to remove them as far as possible before they give rise to complaints.

Water Supply (Continued)

PRIVATE SWIMMING POOLS

Number of pools	4
Number of samples taken	14
Number of samples found unsatisfactory	-

Three of these pools are attached to schools in the town and one is situated at a factory on the industrial site. It is encouraging to note that the results of all samples taken were satisfactory. In addition to the taking of bacteriological samples, checks are made by the staff of this Department on the chlorine content of the water. Advice was again given to persons in charge concerning adequate chlorination.

INSPECTIONS, ETC.

PUBLIC HEALTH ACT, 1936

Number of notices served under the Public Health Act:-

Formal	1
Informal	45

Number of notices complied with:-

Formal	3
Informal	54

Legal Proceedings

Because of the failure of the occupier of a farm to comply with notices served under Sections 39, 50 and 93 of the Public Health Act following the fouling of ditches with farm drainage, legal proceedings were instituted against the occupier of the farm. Action was also taken under Section 259 of the Act against the occupier of the farm and one of his employees for depositing filth (i.e. contents of a cesspool) into a watercourse. Penalties totalling £7 were imposed against the persons concerned and an Abatement Order under Section 94 of the Public Health Act, 1936, was made requiring the defendant to abate the nuisance on the premises within 28 days.

Public Health Act, 1936 (Continued)

COMPLAINTS

Number of complaints received (other than for rats and mice)	175
Inspections	175
Re-inspections	202

This represents a 70% increase in the number of complaints received as compared with 1958 and is probably reflective of the community settling down and making fuller use of the local authority services.

MOVEABLE DWELLINGS

Inspections	12
Number of notices served	-
Number of moveable dwellings licensed	3

The number of caravans in the district remained small and again no exceptional problems were encountered.

SECTION 89, PUBLIC HEALTH ACT, 1936

Power to require sanitary conveniences to be provided at inns, refreshment houses, etc.

Plans were submitted during the year for the modernisation and improvement of the one older public house which had not yet received attention.

INFECTIOUS DISEASES

Visits of enquiry	894
Rooms disinfected	2
Number of personal specimens submitted for bacteriological examination	484

These figures represent a fourfold increase in the number of visits and a fivefold increase in the number of personal specimens submitted. This is largely accounted for by the Paratyphoid outbreak, but to some extent the increase in the number of personal specimens can be attributed to the greater use of the Public Health Laboratory Service by general practitioners.

INSECT PESTS

Number of visits in connection with vermin (bed bugs, fleas, etc.)	67
Number of rooms treated for vermin	75

The above figures relate to 19 premises and although small, again show a considerable increase over 1958.

Wasps

During the summer a large number of complaints were received regarding wasps' nests. This Department continued to give advice in respect of same and a scheme for the loan of equipment and insecticide at a small charge was introduced.

DRAINAGE WORK

Number of visits in connection with drainage	599
Houses connected to main drainage	18
Houses provided with flushing cisterns	-
Privies converted to E.C.'s ...	-
E.C.'s converted to W.C.'s	-
Drains repaired	8

DUSTBINS

New dustbins supplied at the request of the Department	15

OFFENSIVE TRADES

Number of premises registered (bone boiling & fat extracting)	1
Number of inspections	19

FOOD AND DRUGS ACT, 1955

Number of food premises in the district:-

(Over)

FOOD AND DRUGS ACT, 1955 (Continued)

Grocers and provisions shops	66	
Confectioners	29	
Greengrocers	32	
Butchers	29	
Bakehouses	7	
Bakers' Shops	17	
Fishmongers	13	
Cafes and Restaurants	25	
Licensed premises	21	
School Canteens	27	
Factory Canteens	43	
Nursing and Convalescent Homes	3	
Clubs, etc.	12	
Total		324

Food Hygiene Regulations, 1955

Number of inspections	1,098
Number of notices served	56
Number of notices complied with	50

Premises registered under Section 16

For sale of ice cream:-

Grocers and provisions shops	37	
Confectioners	27	
Bakers' shops	11	

For the manufacture of sausages, preserved foods, etc.:-

Butchers	20	
Grocers	4	
Total		99

Number of inspections	190

Food & Drugs Act (Continued)

Meat and Other Foods

The following articles of food were examined during the year and condemned as unfit for human consumption:-

166 Tins Meat	37½ lbs. Kidneys
458 Tins Fruit	38½ lbs. Liver
205 Tins Vegetables	14 lbs. Sausages
53 Tins Fish	18 lbs. Brawn
42 Tins Milk	153 lbs. Ham
3 Tins Soup	
2 Tins Spaghetti	16½ Stone Fish
3 Tins Tomato Juice	
1 Tin Fruit Pudding	7½ lbs. Cheese
1 Tin Christmas Pudding	
1 Tin Preserve	24 Meat Pies
1 Tin Drinking Chocolate	12 Cornish Pasties
2 Tins Baby Food	
3 Jars Preserve	
1 Jar Pickled Walnuts	
1 Pkt. Sponge Mix	

Method of Disposal of Condemned Food

Meat and fish are stained and released where appropriate for by-product usage, otherwise the condemned food is buried on the Council's refuse tip.

FOOD HYGIENE

Again every opportunity was taken of instructing food handlers on Food Hygiene. Only a few organised talks were given but much good work was also done by your inspectors during the course of the routine visits.

Reports were made to the Public Health Committee on twenty matters in respect of possible infringements of the Food and Drugs Act and the Food Hygiene Regulations.

Legal proceedings were instituted in one instance. The defendants were fined £25 on each of two charges relating to their failure to clean equipment (cake trays) and the Council were awarded 10 guineas costs.

MILK

Milk and Dairies Regulations, 1949-1954

Number of dairies registered (distributing depots) 2

Milk Supply

Number of registered purveyors of milk 35

Dealers' Licences

Tuberculin Tested 23
Pasteurised 33
Sterilised 18

Number of notices served under Regulations ..... -
Number of notices complied with .. -

Milk Samples

Bacteriological examination of milk:

Designation	Samples taken	Up to standard	Below standard (Failed Methylene Blue Test)
Tuberculin Tested	15	14	1
T.T. Pasteurised	26	26	-
Pasteurised	30	30	-
Sterilised	4	4	-
Total:	75	74	1

These figures show considerable improvement in respect of raw Tuberculin Tested Milk supplies.

Milk Samples (Continued)

Biological examination of milk:

Designation	Samples taken	Up to standard	Below standard
Tuberculin Tested	4	4	-

ICE CREAM

No. of samples	Prov. Grade I	Prov. Grade II	Prov. Grade III	Prov. Grade IV
32	29	1	1	1

These results again indicate a satisfactory standard. The two less satisfactory results were both attributable to inadequate sterilising of equipment by retailers when serving loose ice cream. Appropriate advice was given in each case.

KNACKERS' YARDS

Number of premises licensed... 1
Number of inspections 19

The standards maintained at the knacker's yard have been satisfactory, both as regards general sanitation and as regards the care of animals taken in.

In spite of much concern over the supply of raw knackers' meat for feeding of domestic pets, no legislation affording effective control is as yet in force. During the year, as the Council are aware, regulations were made giving control, but these were revoked before they came into force. Further regulations are still awaited.

SECTION 38, SHOPS ACT, 1950

Number of inspections 72

The fact that this Department is responsible for the provisions of the whole of Section 38 of the Shops Act greatly facilitates administration, particularly in respect of food premises. Difficulties would no doubt have arisen if those parts of the section relating to lighting, washing facilities and feeding facilities had still been administered by the County Council.

PREVENTION OF DAMAGE BY PESTS ACT, 1949

Rodent Control

Number of complaints received...	397
Number of infested premises found as a result of survey	126
Estimated number of rats killed	1147
Estimated number of mice killed	540
Number of rats picked up after treatment	192

The number of complaints received in respect of rats and mice represents an increase of almost 3% as compared with 1958. This would appear to be attributable to the exceptionally fine summer which encouraged breeding.

It was again found necessary to treat certain lengths of sewers in the older parts of the town.

The Council's refuse tip was again remarkably free of infestation - a fact which can be attributed to continuation of good standards of maintenance, coupled with regular inspection.

HOUSING

It had been hoped that a detailed survey could be made of houses in the older parts of the town, but it was not possible for the appointment of the additional inspector to be made and the survey again had to be left in abeyance.

Considerable interest was, however, shown in the new system of improvement grants and it is hoped that this will go a long way towards raising the standard of older properties.

In spite of the general attention which has been called to the inadequacy of the standard of fitness as defined by the Housing Act, no amending legislation was forthcoming.

Housing (Continued)

Several complaints were received during the year regarding condensation in new dwellinghouses and the prevention of this occurrence is a matter which could well receive more attention when houses are being designed and equipped.

Inspection of dwellinghouses during the year:-

Total number of visits for housing defects under Public Health and Housing Acts 492

Housing Act, 1957

1. Houses demolished in the period

Houses demolished as a result of formal or informal procedure 2

2. Houses closed in the period

(a) Under Sections 16(4), 17(1) and 35(1) 1
(b) Under Sections 17(3) and 26 ..... -
(c) Parts of buildings closed under Section 18 ... -

3. Unfit houses in temporary use

(a) Retained for temporary accommodation

(1) Under Section 48 ..... -
(2) Under Section 17(2) ..... -
(3) Under Section 46 ..... -

(b) Licensed for temporary occupation under Sections 34 or 53 ..... -

4. Houses Let-in-Lodgings

(a) Formal notices served under Section 36 ..... -
(b) Formal notices served under Section 90 ..... -
(c) Formal notices complied with ..... -

Housing (Continued)

5. Overcrowding - Part IV, Housing Act, 1957

(a) 1. Number of dwellings overcrowded at end of year ..... -
2. Number of families dwelling therein..... -
3. Number of persons dwelling therein ..... -
(b) Number of cases of overcrowding reported during the year ..... -
(c) Number of cases of overcrowding relieved during the year ..... -
(d) Number of formal notices to abate overcrowding -
(e) Number of formal notices complied with ..... -

In calculating the "permitted number" of persons for a dwelling, living rooms are still required to be taken into account. It would be more realistic if the Act were to be revised and to require the permitted number to be calculated solely in respect of bedroom accommodation.

6. Unfit houses made fit and houses in which defects were remedied

Unfit houses rendered fit and houses in which defects were remedied during the period as a result of informal action by the local authority under the Housing and Public Health Acts 29

(a) After formal action under Public Health Act:

1. By Owners ..... -
2. By local authority in default of owners ..... -

(b) After formal action under Sections 9 and 16, Housing Act, 1957:

1. By Owners ..... -
2. By local authority in default of owners ..... -

(c) Under Section 24, Housing Act, 1957 ..... -

RENT ACT, 1957 - CERTIFICATES OF DISREPAIR

Number of Form G received 3
Number of Undertakings accepted ..... -
Number of Certificates issued 3
Number of Certificates cancelled 1

RENT ACT, 1957 - CERTIFICATES OF DISREPAIR (Continued)

From these figures it is obvious that little use is now being made of this Act by occupiers. Quite a number of complaints are received in respect of matters of disrepair which the Council cannot require to be remedied under existing legislation. In such cases tenants are advised of the provisions of the Rent Act, but few appear to avail themselves thereof.

FACTORIES ACT, 1937

(1) Inspections for purposes of provisions as to health.

Premises (1)	Number on Register (2)	Number of Inspections (3)	Written notices (4)	Occupiers prosecuted (5)
(i) Factories in which Sections 1, 2, 3, 4 & 6 are to be enforced by local authority	5	-	-	-
(ii) Factories not included in (i) in which Section 7 is enforced by local authority	138	109	2	-
(iii) Other premises in which Section 7 is enforced by local authority (excluding outworkers' premises)	56	26	1	-
TOTAL	199	135	3	-

Factories Act (Continued)

(2) Cases in which defects were found.

Particulars	Number of cases in which defects were found				Number of cases in which prosecutions were instituted
	Found	Remedied	Referred To H.M. Inspector	Referred By H.M. Inspector	
(1)	(2)	(3)	(4)	(5)	(6)
Want of cleanliness (S.1)	-	-	-	-	-
Overcrowding (S.2)	-	-	-	-	-
Unreasonable temperature (S.3)	-	-	-	-	-
Inadequate ventilation (S.4)	-	-	-	-	-
Ineffective drainage of floors (S.6)	-	-	-	-	-
Sanitary Conveniences (S.7) (a) Insufficient	-	-	-	-	-
(b) Unsuitable or defective	3	2	-	-	-
(c) Not separate for sexes	-	-	-	-	-
Other offences against the Act (not including offences relating to Outwork)	-	-	-	-	-
TOTAL	3	2	-	-	-

Factories Act, 1937 (Continued)

Outwork - Sections 110 & 111

Nature of work	Section 110			Section 111		
	No. of out-workers in Aug. list required by S.110 (1)(c)(2).	No. of cases of default in sending lists to the Council.	No. of prosecutions for failure to supply lists.	No. of instances of work in unwholesome premises.	Notices served.	Prosecutions.
(1)	(2)	(3)	(4)	(5)	(6)	(7)
Wearing apparel (making)	11	-	-	-	-	-
Costume jewellery	108	-	-	-	-	-
Christmas crackers	1	-	-	-	-	-
TOTAL	120	-	-	-	-	-

Section 34 - Means of Escape

Number of inspections	59
Number of new certificates issued	7
Number of amended certificates issued	2

Every effort was made to keep up-to-date with these duties and the situation can be regarded as satisfactory when considering the numerous difficulties which arise over the issue of initial certificates and the frequent need for revision.

During the year 7 new certificates were issued and 2 certificates revised.

Section 34 - Means of Escape (Continued)

I again wish to express gratitude to the County Fire Brigade Officers for their assistance with inspections and for their valuable advice on particular fire hazards.

SECTION 60, PUBLIC HEALTH ACT, 1936 - Means of Escape from Fire in the case of Certain High Buildings.

Number of inspections	36

Number of notices served:-

Formal	-
Informal	3

Number of notices complied with:-

Formal	-
Informal	2

It is by no means easy to apply the provisions of this section to existing occupied buildings and considerable care and thought are necessary to ensure that the means of escape is reasonable without incurring great expense. The help of the County Fire Officers in this respect is again much appreciated.

CLEAN AIR ACT, 1956

Smoke Control Areas

A Public Inquiry was held on 3rd June, 1959, in respect of the Council's first Smoke Control Order (for the Gossops Green neighbourhood) and the Minister subsequently confirmed the Order without variation. Ground work was carried out for the extension of the Council's smoke control order programme.

From enquiries made it appears that about half of the population in Crawley have already ceased to use raw coal in their houses and if effective use can be made of propaganda to increase this proportion, the work of this Department in relation to further smoke control orders will be considerably lessened. Talks were offered to women's organisations for the winter session 59/60 and an encouraging number of acceptances was received.

There also appears to be a marked trend towards the use of gas and electricity as alternatives to coal. This is probably accounted for to a large extent by the fact that a high proportion of the town's housewives are now employed part or whole-time in local shops and industries and find gas and electricity more convenient to use.

Industrial Plant

Close attention has again been given to new plant being installed in industrial and business premises, and a good standard of equipment has been maintained. Although applications for prior approval numbered only one, the specifications for all other plant were obtained and agreement reached with the installation engineers, with satisfactory results in all cases.

Industrial plant as a whole can be considered as being very satisfactory but a good deal of atmospheric pollution was caused by the burning of refuse on factory premises. Efforts were made to encourage industrialists to use other methods of disposal and the results so far, although comparatively hard to achieve, have been reasonably encouraging.

It was necessary, however, to institute legal proceedings against the occupiers of a factory on account of repeated nuisance to residents in the neighbourhood from smoke arising from the burning of wood-waste. Action was taken under Section 94 of the Public Health Act (with reference to Section 16 of the Clean Air Act). The Court found that a nuisance had existed and made the necessary Order prohibiting a recurrence. Shortly afterwards, however, the occupiers vacated the premises.

PETROLEUM (CONSOLIDATION) ACT, 1928

Number of licences issued	53
Number of inspections	166
Number of disused installations made safe	2

Although the situation as regards licensable materials can generally be regarded as satisfactory, cases were still noted of comparable dangers arising in respect of non-licensable materials over which no control can be exercised. In conjunction with the County Fire Officers, however, advice was given as to precautions which could be taken.

HOME SAFETY

Fabrics (Misdescription) Act, 1913
Fabrics (Misdescription) Regulations, 1959
Heating Appliances (Fireguards) Act, 1952

The implementation of the Heating Appliances (Fireguards) Act, 1952 was already the responsibility of this Department and during the year it was also resolved that the provisions of the

HOME SAFETY (Continued)

Fabrics (Misdescription) Act, 1913 and Fabrics (Misdescription) Regulations, 1959 be administered by this Department. A general watch is kept on heating appliances exposed for sale in the district and appropriate tests applied as necessary. No cases of non-compliance with the Act were found, a vast majority of fitted guards now being in accordance with B.S.S. 1945: 1953. As regards the Fabrics (Misdescription) Act and Regulations, it appears that some general direction from the Home Office would be desirable in order to achieve nation-wide control with a reasonable amount of administration.

When it is realised that the number of fatal accidents in the home is very considerably higher than the number of road fatalities, it is obvious that considerably stronger measures should be taken to prevent such accidents. It is also apparent that the Public Health Inspectorate generally could assist to a large extent in this respect in view of their frequent visits to people's homes. There is also much scope for publicity of precautions which can be taken by householders.

PET ANIMALS ACT, 1951

Number of premises licensed	4
Number of inspections	9

COURSES OF INSTRUCTION ATTENDED

Chief and Deputy Inspectors	- "Radioactivity and its Hazards in Relation to Biology and Medicine".
Additional Inspector	- Weekend School, Public Health Inspectors Association.

The course on Radioactivity provided an extremely useful insight into the extent of this problem as it is likely to be encountered by a Public Health Department.

Refresher courses such as the weekend school attended by Mr. Poole are extremely helpful in keeping staff up-to-date with modern demands, and I again express appreciation to the Council for recommending such attendances.